

INACLETE HOUSE,
ANNFIELD PLAIN,
APRIL, 1923.

TO THE CHAIRMAN AND MEMBERS OF THE ANNFIELD
PLAIN URBAN DISTRICT COUNCIL.

GENTLEMEN,—

I beg to submit for your consideration the following Report upon the Health and General Sanitary Condition of the District for the year 1922.

W. M. MORISON, D.P.H.

1. General Statistics.

Area (acres) ...	...	...	...	3,475
Population (1921) ...	...	...	...	16,860
Number of inhabited houses (1921) ...	...	...	...	3,258
Number of families or separate occupiers (1921) ...	...	...	...	3,555
Rateable Value ...	...	...	...	£59,847
Sum represented by a penny rate ...	...	...	...	£245/15/0
Population (1922) R.G....	...	...	...	17,000

2. Extracts from Vital Statistics of the Year.

		Total.	M.	F.		
Births	{ Legitimate .. }	409	197	190	{ Birth Rate (R.G.) ...	24·06
	{ Illegitimate ... }					
Deaths	... ..	208	112	96	Death Rate (R.G.) ...	12·24
Number of women dying in, or in consequence of, childbirth { from sepsis ... 0						
from other causes 2						
Deaths of Infants under one year of age per 1000 births :—						
	Legitimate ...	105·1	Illegitimate ...	2·4	Total ...	107·6
Deaths from Measles (all ages)	...		...	1		
Deaths from Whooping Cough (all ages)	...		...	1		
Deaths from Diarrhoea (under 2 years of age)	...		...	3		



Causes of Death in Annfield Plain Urban District, 1922.

Causes of Death.	Males.	Females.
All Causes	112	96
1 Enteric Fever		
2 Small-pox		
3 Measles	1	
4 Scarlet fever	1	1
5 Whooping-cough		1
6 Diphtheria	2	3
7 Influenza	6	4
8 Encephalitis lethargica		1
9 Meningococcal meningitis		
10 Tuberculosis of respiratory system	2	7
11 Other tubercular diseases	2	3
12 Cancer, malignant disease	5	7
13 Rheumatic Fever		
14 Diabetes		1
15 Cerebral hæmorrhage, &c.	5	6
16 Heart disease	16	8
17 Arterio-sclerosis	6	3
18 Bronchitis	11	11
19 Pneumonia (all forms)	18	10
20 Other respiratory diseases	2	2
21 Ulcer of stomach or duodenum		1
22 Diarrhoea, &c. (under 2 years)	2	1
23 Appendicitis and Typhlitis... ..		
24 Cirrhosis of Liver		2
25 Acute and chronic nephritis		4
26 Puerperal sepsis		
27 Other accidents and diseases of pregnancy and parturition		2
28 Congenital debility and malformation, premature birth	10	5
29 Suicide		
30 Other deaths from violence... ..	1	
31 Other defined diseases	22	13
32 Causes ill-defined or unknown		
Special causes (included above)		
Poliomyelitis		
Polioencephalitis		
Deaths of infants under 1 year of age		
Total	24	19
Illegitimate	1	
Total Births	207	202
Legitimate	197	190
Illegitimate	10	12
Population	17,000	



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The following Table gives the averages of the births and deaths, &c., for the County in comparison with those of the District.

					County.	Annfield Plain.
					(per 1000 population)	
Birth-rate	...	...	...	...	25·96	30·60
Death-rate	...	...	...	...	12·70	12·24
Zymotic death-rate	...	...	...	...	0·56	0·70
Small Pox	...	...	...	...	nil	nil
Scarlet Fever	...	...	...	...	0·02	0·12
Diphtheria	...	...	...	...	0·08	0·29
Enteric Fever	...	...	...	...	0·015	nil
Measles	...	...	...	...	0·06	0·06
Whooping Cough	...	...	...	...	0·19	0·06
Diarrhoea (under 2)	...	...	...	...	0·18	0·18
Phthisis death-rate	...	...	...	...	0·86	0·53
Influenza	...	...	...	...	0·96	0·06
Acute Respiratory diseases	...	...	...	...	2·55	1·90
Infantile Mortality-rate	...	...	...	...	97 per 1000 births	107·60

Our birth-rate is higher and our death-rate lower than the average for the County. These rates are quite satisfactory, but our Infantile Mortality-rate is unfortunately this year again higher than that of the average for the County, this we attribute in a large measure to the unhygienic surroundings of the mining community, and the lack of the necessary physiological rest during the child-bearing period, with the result that many children are born prematurely or congenitally defective.

Notifiable Diseases during 1922.

Analysis of the total cases and deaths under all groups.

Disease.		Total	Under 1 year	2	3	4	5	10	15	20	35	45	65	Admitted to Hospital	Total Deaths
Diphtheria		49		2	2	5	8	25	4	1	2			47	5
Enteric		nil													
Erysipelas		11		1	1			2					7		
Encephalitis Lethargica		1						1							1
Pneumonia		8		1				2		1	2		2		28
Scarlet Fever		37		4	1	3	4	10	8	4	2	1		37	2
Total		106		8	4	8	12	40	12	6	6	1	9	84	36
Tuberculosis :															
Pulmonary	M.	7						1		2	2	1	1		} 9
	F.	7						1			5	1			
Non-Pulmonary	M.	7						4		3					} 5
	F.	5				1	1		1		1	1			
Total		26				1	1	6	1	5	8	3	1		14

	CASES			Vision Un- impaired	Vision Impaired	Total Blindness	Deaths.
	Notified.	Treated.					
		At Home	In Hospital				
Ophthalmia Neonatorum ...	12	12	0	5	0	0	0

There is no complaint generally with regard to the prompt notification of Tubercular Disease by the local practitioners. Some patients, suspecting themselves to be suffering from phthisis, refrain, until their condition becomes much graver, from consulting a medical man because of the restrictions placed upon their movements and a fear of having their suspicion confirmed.

It is satisfactory to record that this year notifiable and non-notifiable infectious diseases were less prevalent than for some years past ; this was due, doubtless, to climatic conditions. Many years ago Diphtheria was a rare disease in this district, but the average for the past ten years, as shown by the above figures, indicates that it is now more prevalent than Scarlet Fever, while Enteric has almost disappeared.

	Number.	Remarks.
PRECAUTIONS AGAINST INFECTIOUS DISEASES.		
Lots of Infectious Bedding stoved or destroyed ...	86	One Destroyed.
Houses disinfected after Infectious Diseases ...	85	
Schools " " 	NONE	
Prosecutions for exposure of infected persons or things	"	
Convictions for " " ...	"	

Soap, water, sunlight and pure air are insisted upon as the most potent disinfectants, while spraying with volatile disinfectants is carried out by the Inspector. Crude disinfectants are also provided for outside use, but emphasis is laid on the fact that these chemicals will not perform miracles without the assistance of the above artificial and natural forces, but above all a true sense of cleanliness, especially when inculcated in youth, is the most effective protection against dirt and infection.

Slaughter Houses.

		1914	1922
Registered	...	0	0
Licensed	...	9	9
		—	—
Total	...	9	9

These places are visited regularly and are usually kept in a satisfactory condition. It is also a pleasure to state that every facility is given to inspect the places and the carcasses, and the Inspector is frequently notified when any diseased or suspected carcasses are discovered.

Unwholesome Food.

The number of Animals slaughtered for consumption in the district was :—

Beasts	...	...	...	989
Sheep	...	...	...	2,330
Pigs	..	...	...	489
Meat (Frozen)		...	...	1,367 Quarters

The following is a list of meat and organs, &c., condemned and destroyed during the year, viz.,

English Beef	...	..	1,308 lbs.
Imported Meat	...	...	100
Livers	...	...	101
Lungs	...	...	6 pair
Stomachs	...	...	6
Heads	...	..	3
Tongues	...	...	3
Fruit (Tinned)	...	...	28½ lbs.

The above articles of food were either Tuberculous or unsound. This certainly is a large quantity of food condemned, but it indicates very forcibly how much supervision is required to safeguard the health of the community.

WATER, FOOD AND DRUGS.

Samples of Water taken for Analysis	...	...	nil.
" " condemned as unfit for use	...	...	nil.
Seizures of Unwholesome Food	...	...	12
Convictions for exposing or selling Unwholesome Food	...	...	nil.
Samples of Food and Drugs taken for Analysis	...	...	—
" " found Adulterated	...	...	nil.

Dairies, Cowsheds and Milkshops.

Cowkeepers.	Dairymen.	Purveyors of Milk.
14	2	8

Councils have more power now, owing to the Dairies and Cowsheds' Act having been amended, over premises that do not come up to the Sanitary requirements. These can be removed from the Register. A special report was made in 1919 on these premises, and three years given to the owners to bring them up to date. Those places not completed are expected to be at once brought within the requirements of the Act, otherwise they may not be registered in future.

Bacteriological Examinations.

The following table gives particulars of the specimens sent in by medical practitioners in the District for examination during the year, in accordance with the arrangement made between the C.C. and the Durham C. of Medicine.

	Number of Specimens Submitted.	RESULTS.		
		Positive	Negative	Inconclusive
Diphtheria	7	2	5	0
Enteric Fever...	0	0	0	0
Phthisis (sputum)	41	4	37	0
TOTALS	48	6	42	0

Bacteriological examination of blood, sputum and excretions of patients is of the greatest value in clearing up the diagnosis of doubtful cases of certain infectious diseases.

Diphtheria anti-toxin only is issued to the practitioners in the district.

Sanitary Administration.

Staff.—Medical Officer of Health.
 { Sanitary Inspector.
 { Meat Inspector.

Adoptive Acts.

The following Adoptive Acts are in force in the District, viz. :—

- 1.—Public Health Acts Amendment Act, 1890.
 - 2.—Public Health Acts Amendment Act, 1907, Parts 2, 3, 4 and 5.
 - 3.—Private Street Works Act, 1892.
 - 4.—Public Libraries Act.
- Baths and Wash-houses Acts.
- Public Health Acts Amendment Act, 1907, Part vii., Section 86,
(Police).

Nursing, &c.

Professional Nursing in the Home.—A Nursing Association has been recently established in our District, and in the meantime only one Nurse is employed for general nursing. The Association is supported by voluntary contributions.

Midwives.—Two Certified Midwives practice in the District under the authority of the Local Nursing Association. A contribution towards their salaries is made by the County Council.

Clinics, &c.—There is one Maternity and Child Welfare Centre for consultation and treatment in the District, established and controlled by the County Council.

Isolation Hospitals.

Annfield Plain Council forms one of the constituent authorities of the Lanchester Joint Hospital Board.

There are four hospitals under its control, viz. :—

Tanfield, Leadgate and Langley Park for diphtheria, scarlet fever, enteric cases, &c., and **Howden Bank** for small pox. All these are outside the Urban District but conveniently near.

The hospital accommodation, except during severe epidemics, is ample for the are of the Joint Hospital Board.

Ambulance Facilities.—Infectious diseases are removed to Hospital by Motor Ambulance, two new up-to-date Ambulances have been provided by the Lanchester Hospital Board for the use of its constituent authorities. Patients are thus removed very expeditiously and comfortably. For Accidents, &c., there is no systematic method of removing patients. Most of the Colliery Companies in the District have Ambulances—not motor—of their own, and these are sometimes given to oblige other than their own workmen.

Summary of work done in the Sanitary Inspector's Department during the year, 1922.

PUBLIC HEALTH ACTS.				Number of Informal written Notices by Inspector.	Number of Formal Notices by Order of Authority.	Number of Nuisances abated after Notice.	GENERAL REMARKS.
Dwelling houses and Schools.	Foul conditions			33		33	
	Structural defects			119		101	Roofs, Windows, Spouting, etc.
	Overcrowding			139		73	Allcc. Council Houses.
Lodging-houses	...	..	...	5		5	Limewashing, etc.
Dairies and Milkshops	...	...	...	20	{	20	Registration, Limewashing, Floors, Windows, etc.
Cowsheds	...	...	...	
Bakehouses	...	...	...	nil		nil	
Slaughter-houses	...	...	...	nil		nil	
Ashpits and Privies	...	...	...	26		18	Doors repaired, etc.
Deposits of Refuse and Manure	...	...	...	5		5	
Water-closets	...	...	...	31		30	Stoppages, broken basins, etc
Defective Yard Paving	...	...	...	37		37	Yards relaid.
House Drainage	Defective Traps...			13		13	Chambers provided.
	No Disconnection from Sewers						
	Other Faults			54		51	Stoppages, Vent-shafts, etc.
Water Supply	...	...	...	1		1	Supply provided to two new houses.
Pigsties	...	...	...	nil		nil	
Animals Improperly Kept	...	...	...	11		10	
Offensive Trades	...	...	...	nil		nil	
Smoke Nuisances	...	...	...	nil		nil	
Other Nuisances	...	...	...	nil		nil	
Ashpits to Cleanse	...	...	...	5		5	
Complaints received	...	...	...	11		10	Overcrowding, repairs, etc.
Totals...				510			

	Number.	Remarks.
GENERAL.		
Number of New Houses erected during the year...	115	106 of these houses erected in connection with New Ewehurst and Catchgate Housing Schemes. Class A—4 living rooms, scullery and bath. Class B—5 living rooms, scullery and bath.
Number of such Houses occupied during the year	115	
Ashpit-privies converted into Ash-closets ...	nil	
„ „ Water-closets ...	30	
Ash-closets „ „ „ ...	6	
Total number of Water-closets in District ...	1258	145 added to district during year.
„ Ash-closets „ ...	1280	
„ Ashpit-privies „ ..	500	

Waterclosets.

	1914	1920	1922
Total number of W.C's.	601	710	1258
do Ash-closets	1034	1037	1280
do Ash-pit Privies	1267	1244	500
do Ashbins (movable)	nil	33	51

It will be seen by the above comparisons that the water carriage system, if not rapidly, is at any rate being introduced when an opportunity presents itself, and that the objectionable ashpit privies are, as they ought to be, correspondingly decreasing in number.

It is, however, impossible to proceed rapidly with the introduction of the water carriage system in our district, owing to the water supply provided by the *Water Board* being inadequate in a dry season to the domestic needs of the community. We expect that in the near future the new County Water Board will meet the Sanitary requirements of the area supplied by them.

Lodging Houses.

There are two lodging houses within the District, one at Hill Top and the other at Flint Hill. They are registered for 45 and 32 lodgers respectively. Improvements have been effected upon the Flint Hill premises, including the substitution of the water-carriage system for the ash-pit privy. The yard also has been relaid and a wash-house provided. These houses are regularly visited by the Sanitary Inspector, and midnight visits are occasionally made.

Poultry in Yards.

In last year's report attention was drawn to the number of yards of private and tenement houses used for poultry. The reprehensible practice was tacitly permitted during the war. There is no reason now why the practice should be allowed to continue, but owing to the fact that there is no Bye-Law to prevent the practice, if unable to prove a nuisance injurious to health in each case, its continuance is difficult to prevent, and advantage is taken of this fact. I wish to draw the special attention of the Council to the necessity of a Bye-Law, in order to prevent the practice.

Scavenging.

It is satisfactory to record that during the year complaints—*re* the above—were very few, that the work was carried out in an entirely satisfactory manner as compared with previous years. There is no reason why this should not continue.

18,001 loads of refuse were removed during the year at a cost of 16/10½ per house as compared with 18/4½ in the previous year, and with one horse less at work. Were the entire district served by the water-carriage system there is unquestionable evidence that the cost of refuse removal would be reduced considerably lower than it is now. However, a further reduction is anticipated next year.

Housing.

New Ewehurst and Catchgate Housing Schemes are now completed, but we must admit that the need for more houses is still as great as ever owing to overcrowding. Many more houses must be built if sanitary progress is expected. Our infant mortality rate is still higher than it should be, Tuberculosis is rampant in the District, and the painful point is that with all the best intentions in the world we cannot act as we should do in order to check the spread of this disease. Houses, which in the ordinary course of sanitary progress, would be closed in order to repair or reconstruct, are occupied because of the absence of alternative accommodation, and these houses became the breeding-ground of all kinds of disease. In all probability—overcrowding, in place of becoming less, will become intensified still more, owing to the opening out in the near vicinity of a large new colliery, likely to employ many hundreds of men. With the opening of a new colliery comes an influx of nomadic workers, usually a class of people not too thrifty and not too careful from a sanitary point of view. This will increase the responsibility of the Sanitary Authorities interested, and will undoubtedly intensify the question of over-crowding, unless a generous housing scheme is immediately set going. Colliery owners, with few exceptions now, put the responsibility of making provision for their workmen upon the Local Authorities.

I subjoin a report upon our housing needs by the Deputy County Medical Officer of Health.

HOUSING NEEDS.—On the 26th October last I received a letter from the Clerk of the District Council asking the County Council if they could see their way to influence the Ministry of Health to allow them to proceed with the construction of further houses under the Assisted Housing Scheme of the Ministry of Health. A careful inspection of the district has since been made and the following is a report by the Deputy County Medical Officer of the housing needs of this area, from which it appears that the district is urgently in need of additional houses to relieve the overcrowding and to replace those that are unfit for habitation but which at present are occupied owing to difficulty in making provision for those who would be homeless if the houses were closed:—

I have recently inspected the Annfield Plain Urban District and I find that not only is there a very great shortage of houses, but that the scarcity of houses is having a very detrimental effect on the general sanitary condition of the district.

OVERCROWDING.—The figures respecting overcrowding at the last Census are not yet available, but on referring to those of 1911 we find that of administrative counties, Durham had, next to Northumberland, the greatest amount of overcrowding, namely, 28·5% of the population, as against 9% in England and Wales. But bad as is the average experience of Durham, it is nothing in comparison with Annfield Plain where the overcrowding amounted to 41·4%.

Another special feature of this district is the very large proportion of small houses which to some extent accounts for the excessive overcrowding, for it will be seen on examining the figures given below that in England and Wales approximately 25% of the tenements occupied by private families contained less than four rooms, in the administrative county it was 50%, while in Annfield Plain it was 64%; in other words nearly two-thirds of the families in the area lived in houses containing less than four rooms.

Attention is also specially drawn to the very large proportion of two-roomed houses which are principally colliery houses; and the Census returns show that many of these two-roomed houses contained from six to eleven persons and in two cases over that number.

PERCENTAGE OF PRIVATE TENEMENTS (CENSUS, 1911).

No. of rooms per tenement.	England and Wales.	Administrative County of Durham.	ANNFIELD PLAIN.
1	3·2	2·4	1·5
2	8·3	21·6	33·2
3	13·9	26·9	29·4
	} 25·4	} 50·6	} 64·1

ACTION TAKEN BY DISTRICT COUNCIL.—The District Council, recognising their responsibility, decided to exercise their powers under Part III. of the Housing of the Working Classes Act, 1890, and a commencement to provide houses was made in 1912, and by 1914 they had erected 60 houses at Catchgate and completed a further 8 by the end of 1916. They were, however, unable to proceed owing to the scarcity of labour and building materials consequent on the Great War. There the matter stood until the spring of 1919 when all the local authorities of the country were summoned together and were told that the present housing conditions would no longer be allowed to continue, that the country required at least 500,000 houses and that with the co-operation of the local authorities the Government would take steps to make this most necessary provision. The result was that later in the year the Housing Act, 1919, was passed which required all local authorities throughout the country to make a careful survey of their respective districts and to submit to the Ministry of Health a statement showing, under various headings, the number of houses required to satisfy the housing needs of their respective districts. The Annfield Plain Urban District Council estimated that at least 700 houses were required and this estimate, after careful consideration by the Housing Commissioner, was formally approved by the Ministry of Health and in due course the District Council received orders to proceed. Fortunately the Council had in the meantime made provisional arrangements for the purchase of $8\frac{1}{2}$ acres of land at New Ewehurst which enabled them to start immediately with the erection of 91 houses on that site. Negotiations were then commenced for additional land and ultimately the Council agreed to purchase five other sites in their area on which to erect the remaining houses. They have built 140 houses and have applied to the Ministry of Health for permission to proceed with the erection of further houses, but this the Ministry decline and have informed the Council to the effect that they have had more than their share of the 176,000 houses which the Government had undertaken to provide under the Assisted Housing Scheme.

It is difficult to understand the precise meaning of this reply to the Annfield Plain Urban District Council for it will be remembered that in July, 1921, when the Prime Minister defined the Housing Policy of the Government he said that they were only now crying a halt. There was no question of cutting down the number of houses required by the several local authorities and approved by the Ministry of Health, in fact he told us that "there will not be a single house the less built. On the contrary there will be more houses built . . . because we know that by pulling up now, by liquidating this gigantic obligation we have upon us of 176,000 houses, and then by meeting the building trade on equal terms, there will be more houses, . . . cheaper. . . . I say this is simply an effort—and I use the phrase which I used before—"not to stop house building, but to put it on a better and more business-like footing."

Since this halt was called most of the local authorities have completed the instalment of houses which they had in hand or had permission to build and are now wanting to know when they are to proceed with the rest of their scheme. Many of them have not only purchased the building sites but have constructed the streets and have laid the sewers and water supply in readiness.

The holding up of the housing schemes and the uncertainty as to the future is having a paralysing effect on the sanitary administration of the districts. In Annfield Plain there is quite a number of houses which "fall definitely below a reasonable standard." The owners in one or two cases have given a definite undertaking to the local authority to reconstruct their property but before the work can be commenced more houses must be provided.

There are other houses which are quite unfit for habitation, some in fact in a ruinous condition, but here again for similar reasons the local authority are unable to enforce their powers. Instances of these, and all belonging to or leased by the same colliery company, are to be found in Clavering Place (70 wooden houses), Annfield Place (6 rows each containing twelve 2-roomed houses, 14 of which are unoccupied), a row in Blackett Street, and a group of about 42 back-to-back houses in West Kyo.

I am glad to say that all the colliery companies, and there are some six or seven in this area, have not shown the same indifference to the health and comfort of their workmen as the owners of these houses. Most of them, I am told, keep their property in fairly good repair; at least two—Messrs. Ritson's South Pontop Colliery and Messrs. Bowes and Partner—have in the one case rebuilt a number of their houses and in the other erected before the War about 50 houses; and one or more have come to an agreement with the local authority to reconstruct some of their property when circumstances permit.

There are, however, many other houses in the district greatly in need of repair and improvements generally, but it will be appreciated that the local authority find it difficult to get the alterations carried out without appearing unjust and arbitrary while such glaring examples of houses unfit for habitation are allowed to be occupied.

I do not propose to give in detail particulars of all the properties I inspected, for these are mentioned in Dr. Smedley's report on this district (1908) and in the report of the County Medical Officer (31/12/1918), but I am bound to draw special attention to the following:—

Pontop Rows, Annfield Plain.

Jackson Square, West Kyo.

Alma Place, West Kyo.

John and James Streets, White-le-Head.

Wilkinson's Buildings, Delight Bank.

Delight Rows, Front Street, Dipton

Doulaise Place, Dipton.

Bute Cottages, Dipton

Old Greencroft Cottages.

Gorcock Terrace, Greencroft.

This is a brief statement of the position of the Annfield Plain Urban District and what I have said with regard to the scarcity of houses and the difficulty in getting improvements to property carried out in this district applies to most of the sanitary districts in the County with the result that while a comparatively small number of houses in most districts have been erected under the Government's Assisted Housing Scheme, the rest of the property, and more particularly the older houses, which are in constant need of repair, are rapidly deteriorating.

For many months now we have been told that the cost of building was falling and we have been persuaded to believe that if we only wait a little while longer private enterprise will provide the necessary houses. They have not done so yet and our experience before the War gives us no hope that they will do so now. The Annfield Plain Urban District Council, who have had considerable experience in the erection of houses, have carefully gone into the question and find it impossible to erect a house which could be let at an economic rent and the big employers of labour apparently consider that the obligation to provide houses does not rest with them. Building is at a standstill and there seems to be no prospect of a start being made. In the meantime we are paying out large sums of money in sickness and disablement benefit to insured persons, amounting in this County to 37% above the average for England and Wales, and besides the loss in productive power, we are spending large sums in the cure and amelioration of many forms of sickness and chronic ill-health which we believe to be the end results of bad housing.

Number of new houses erected during the year :—

(a) Total	...	...	...	...	...	115
(b) As part of a municipal houses scheme	...	...	...	...	...	106

1.—Unfit Dwelling Houses—Inspection.

(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	...	...	...	...	119
(2) Number of dwelling houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910...	...	...	...	...	140
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	...	None
(4) Number of dwelling houses (exclusive of those referred to under preceding sub-heading) found not to be in all respects reasonably fit for human habitation	...	...	...	...	77

2.—Remedy of Defects without Service of Formal Notices.

Number of defective dwelling houses rendered fit in consequence of informal action by Local Authority or their Officers	67
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3.—Action under Statutory Powers.

A.—Proceedings under Section 28 of Housing, Town Planning, Etc., Act, 1919.

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	...	...	...	...	None
(2) Number of dwelling-houses which were rendered fit :—					
(a) by Owners	...	...	...	...	None
(b) by Local Authority in default of Owners	...	...	...	...	None

B.—Proceedings under Public Health Acts.

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	...	...	...	...	119
(2) Number of dwelling-houses in which defects were remedied :—					
(a) by Owners	...	...	...	...	101
(b) by Local Authority in default of Owners	...	...	...	...	None

C.—Proceedings under Sections 17 and 18 of the Housing, Town Planning, Etc., Act, 1909.

(1) Number of representations made with a view to the making of closing orders	...	...	...	...	None
(2) Number of dwelling-houses in respect of which closing orders were made	...	...	...	...	"
(3) Number of dwelling-houses in respect of which closing orders were determined, the dwelling-houses having been rendered fit	...	...	...	...	"
(4) Number of dwelling houses in respect of which demolition orders were made	...	...	...	...	"
(5) Number of dwelling houses demolished in pursuance of demolition orders	...	...	...	...	"

W. M. MORISON, D.P.H., Etc.,
Medical Officer of Health.

April, 1923.

